## **Application Data Sheet**

Application Information

Application number::

Filing Date:: November 13, 2001

Application Type:: Regular

Subject matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks:: None

Number of copies of CDs:: None

Sequence submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: HYBRID PHOTONIC/ELECTRONIC

SWITCHING IN A MULTI-CHANNEL

NETWORK

9/987,164

Attorney Docket Number:: Q67243

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: Figs. 1 and 2

Total Drawing Sheets:: 2

Small Entity?:: No

Initial February 28, 2002

MAR 0 8 2002 Chnology Center

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I-CHANNEL

243

**Applicant Information** 

Applicant Authority Type:: First Named Inventor

Primary Citizenship Country:: United Kingdom

Status:: Full Capacity or Unknown

Given Name:: Adrian

Middle Name:: P

Family Name:: SPARKS

City of Residence:: ONGAR

State or Province of Residence:: ESSEX

Country of Residence:: UNITED KINGDOM

Street of mailing address:: Manor Cottage

City of mailing address:: Ongar

State or Province of mailing address:: Essex

Country of mailing address:: UNITED KINGDOM

Postal or Zip Code of mailing address:: CM5 0PA

Applicant Authority Type:: Second Named Inventor

Primary Citizenship Country:: United Kingdom

Status:: Full Capacity or Unknown

Given Name:: Alan

Middle Name:: T. R.

Family Name:: BRIGGS

City of Residence:: Cambridge

State or Province of Residence:: CAMBRIDGESHIRE

Country of Residence:: UNITED KINGDOM

Street of mailing address:: 2 Ascham Lane

City of mailing address:: Cambridge

State or Province of mailing address:: Cambridgeshire

Country of mailing address:: UNITED KINGDOM

Postal or Zip Code of mailing address:: CB2 4NT

Applicant Authority Type:: Third Named Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity or Unknown

Given Name:: Frederick

Middle Name:: J

Family Name:: LALONDE

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State or Province of Residence:: ONTARIO

Country of Residence:: CANADA

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City of mailing address:: Ottawa

State or Province of mailing address:: Ontario

Country of mailing address:: CANADA

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Applicant Authority Type:: Fourth Named Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity or Unknown

Given Name:: H. D.

Middle Name:: Wade

Family Name:: MACLEOD

City of Residence:: RR #2, Carp

State or Province of Residence:: Ontario

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State or Province of mailing address:: Ontario

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Postal or Zip Code of mailing address:: K0A 1L0

Applicant Authority Type:: Fifth Named Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity or Unknown

Given Name:: Douglas

Middle Name:: W

Family Name:: FISHER

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State or Province of Residence:: ONTARIO

Country of Residence:: CANADA

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City of mailing address:: Brampton

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Postal or Zip Code of mailing address:: L6V 2M7

Correspondence Information

Correspondence Customer Number::

23373

Phone Number::

(202) 663-7907

Fax Number::

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## Representative Information

Representative Customer	23373	
Number::		

## **Assignment Information**

Assignee name::

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Street of mailing address::

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City of mailing address::

St. Laurent

State or Province of mailing address::

Quebec

Country of mailing address::

**CANADA** 

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